Tobacco Cessation: From Planning to Implementation

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**SAMHSA/HRSA Center for Integrated Health Solutions**
National Council for Community Behavioral Healthcare

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The Groundwork for Change

Find the agency's growth edge

Clear buy-in from opinion leaders

Foster awareness & instill hope

Focused message

Culture of Change

Plan for sustainability

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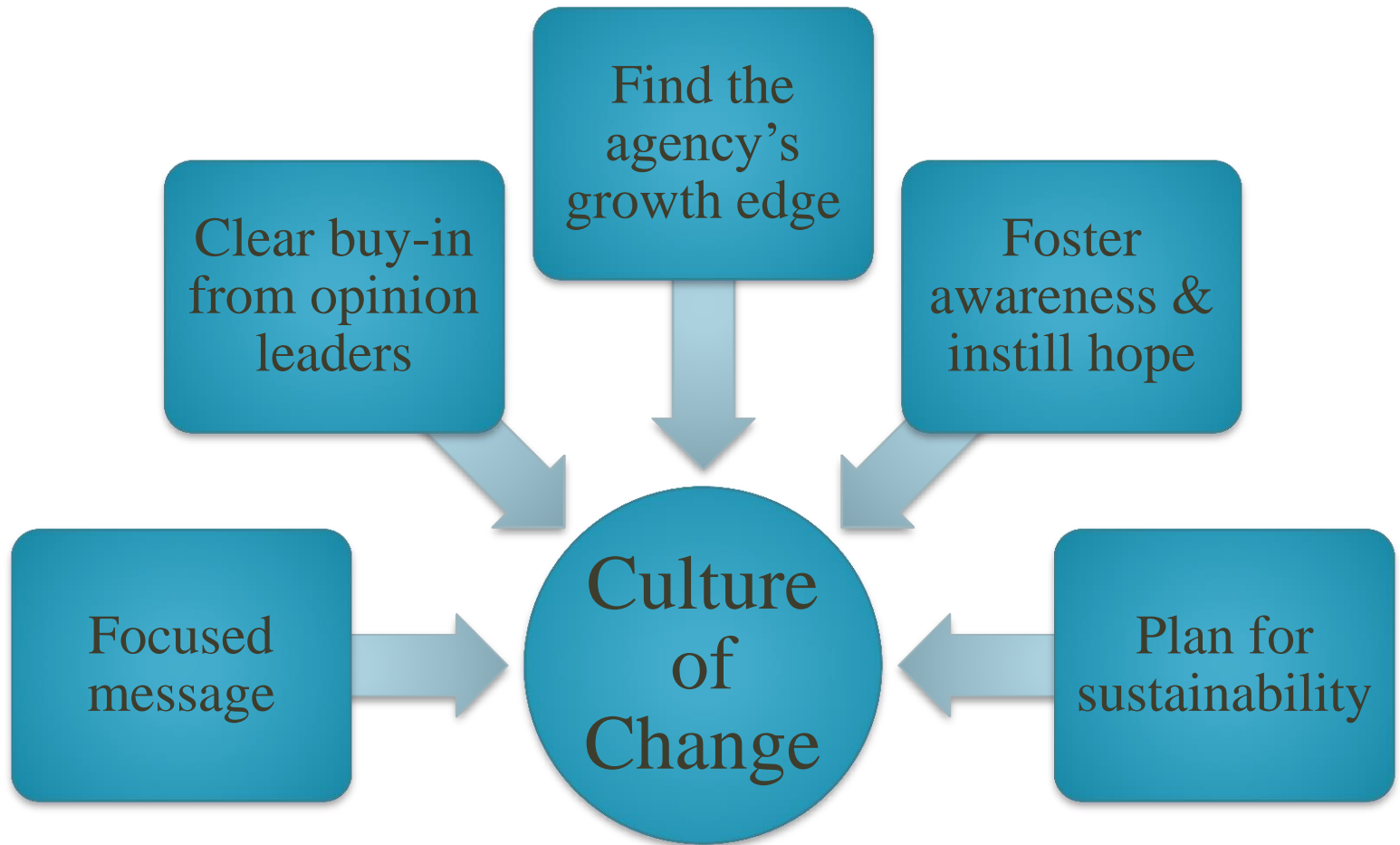
Common Concerns

- "They can't"

- "It isn't relevant"

- "They don't want to"

- "I don't have time to do this on top of everything else"

- "I've always heard smoking helps symptoms. I don't want to make their symptoms worse."

- "They will lose their sobriety if they also try to quit smoking or lose weight"

Common Concerns

- "Smoke breaks are a time when I build relationships with clients"

- "I don't have the training necessary"

- "Why spend time on this when there are more important psychiatric, substance abuse, and medical issues?"

- "If we go tobacco-free, behavioral problems will increase"

- "The issues we face are unique"

- "This is one of their last personal freedoms"

Implementation Hurdles

- Agency Culture and Climate
- Personal Impact
  - Workload/ Paperwork
  - Job security
  - Habit/ Motivation
- Awareness- Knowledge
  - Anxiety/ Fear
  - Beliefs
  - New skill sets
- Unprepared Systems

Agency Alignment

- Identify the Framing Context
  - Mission & Values
  - Co-Occurring/ Dual Disorders
  - Chronic Care/ Integrated Care
- Build a Clear Rationale
  - Tobacco as a Bridge
- Communicate
  - Intentions
  - Expectations
- Demonstrate Leadership

Assessing Readiness

- Staff Forum
- Evaluation
  - Focus Groups
  - Surveys
    - e.g. PBHCI self assessment
  - Change Exercise

- Key Questions
  - What is agency/staff ready for?
  - What are the next steps over 3 to 6 months?

Addressing Staff Variability

- Tolerance for Ambiguity
- Openness to Change
- Motivation
- Confidence
- Skill Level
- Social Values
- Learning Style

Rogers, 2003

# Tobacco Control Self-Assessment & Customized Report

- Assessment of current stage of readiness for each category

- Summary data allows grantees to compare their stage of readiness with grantees across the nation

- Recommendations provided by category with resources

- Potential multi-year assessment will provide progress over grant years for individual grantees and overall program

- Individual and summary reports provided to CIHS/ National Council to assist in assessing training needs
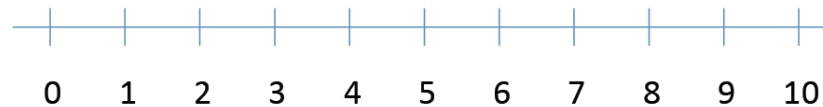
Change Exercise

Importance Ruler

On a scale from 0 to 10, how IMPORTANT is it for you to change RIGHT NOW?
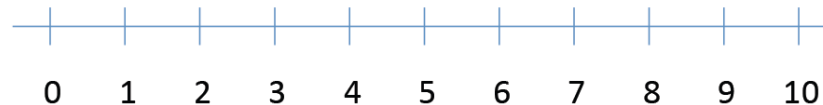
0   1   2   3   4   5   6   7   8   9   10
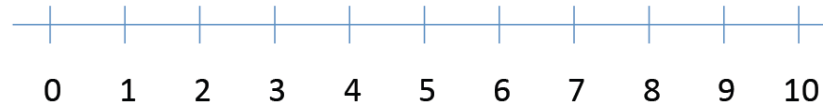
Confidence Ruler

On a scale from 0 to 10, how CONFIDENT are you that you can change RIGHT NOW?

0   1   2   3   4   5   6   7   8   9   10

Readiness for Change Ruler

On a scale from 0 to 10, how READY are you to take steps towards change RIGHT NOW?
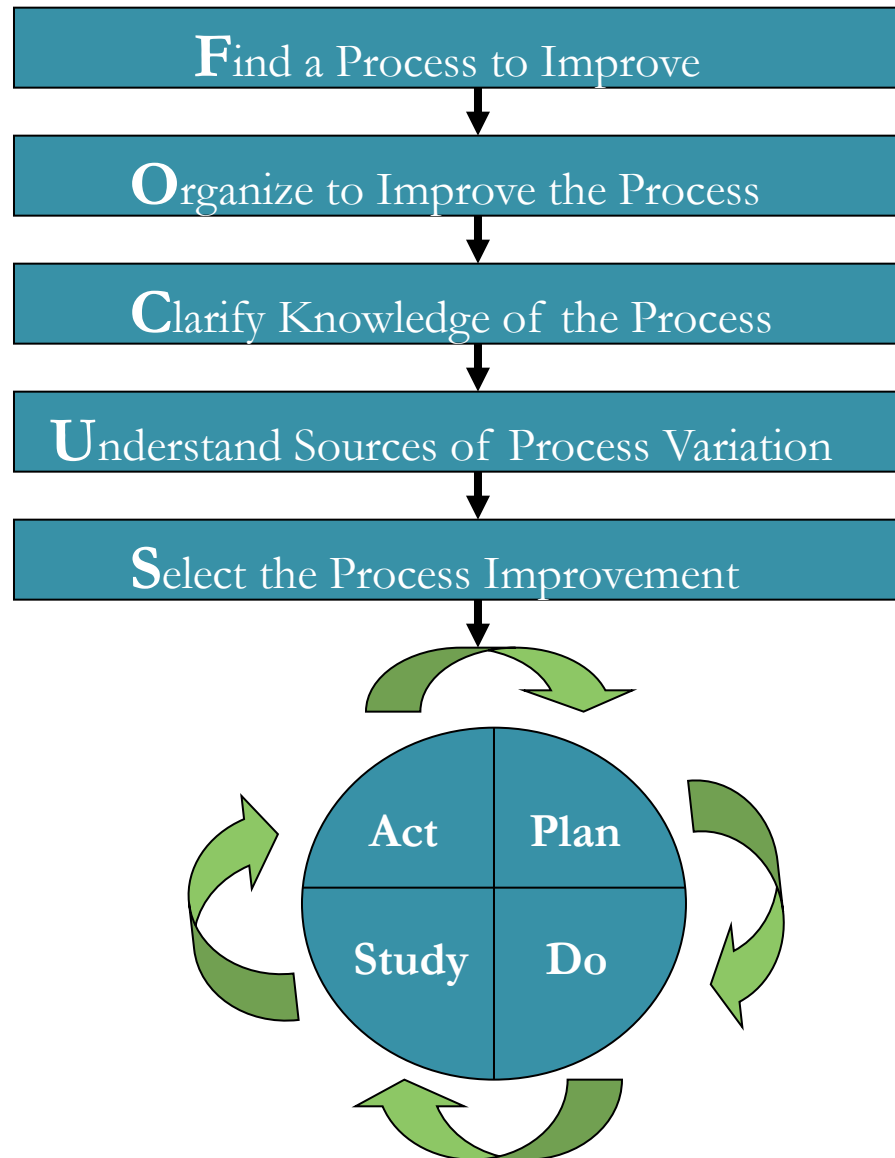
0   1   2   3   4   5   6   7   8   9   10

Control Ruler

On a scale from 0 to 10, how much CONTROL do you have over your ability to make positive change RIGHT NOW?

0   1   2   3   4   5   6   7   8   9   10
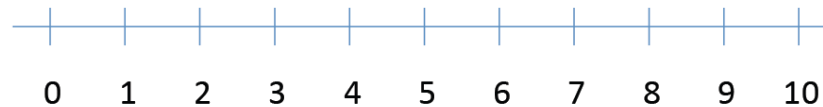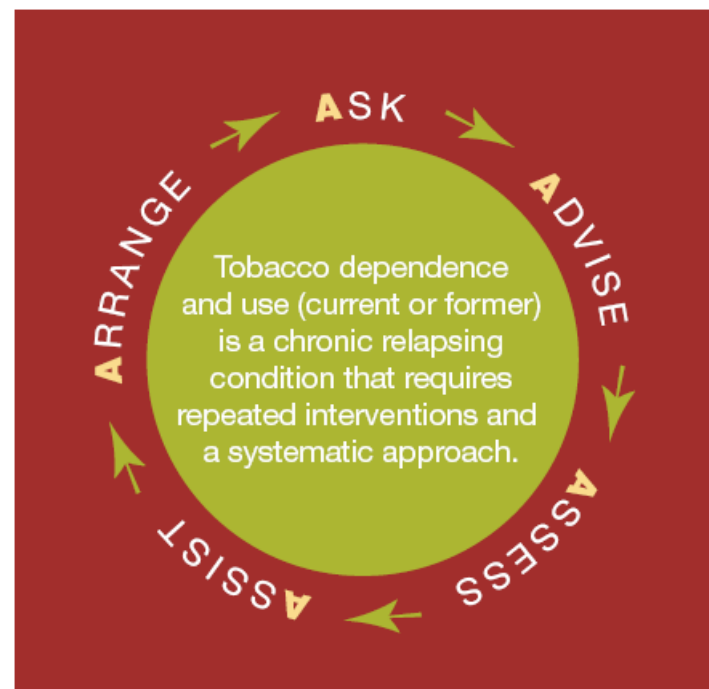
Rapid Improvement Projects

Find a Process to Improve

Organize to Improve the Process

Clarify Knowledge of the Process

Understand Sources of Process Variation

Select the Process Improvement

Act | **Plan**

Study | **Do**

Awareness and Knowledge

- Screening
- Assessment
- Treatment
- Referral
- Follow-up

Tobacco dependence and use (current or former) is a chronic relapsing condition that requires repeated interventions and a systematic approach.

ASK — ADVISE — ASSESS — ASSIST — ARRANGE

Tobacco dependence is a 2-part problem.

Physical	⟷	Behavior
The addiction to nicotine ↓ **Treatment** Medications for cessation		The habit of using tobacco ↓ **Treatment** Behavior change program
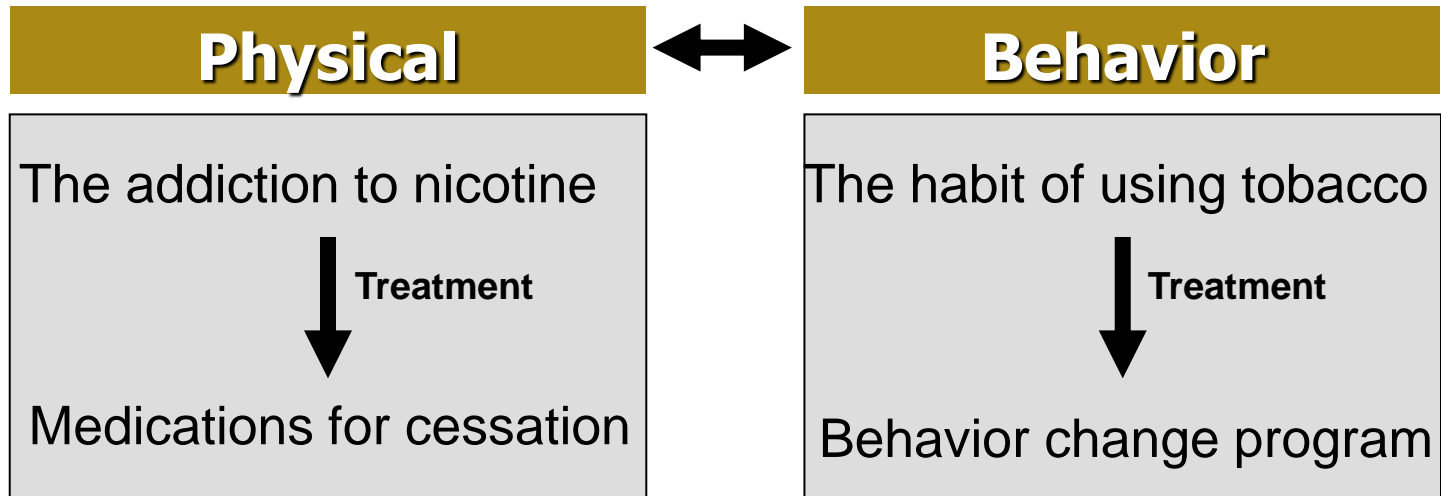
Treatment should address both the addiction **and** the habit.
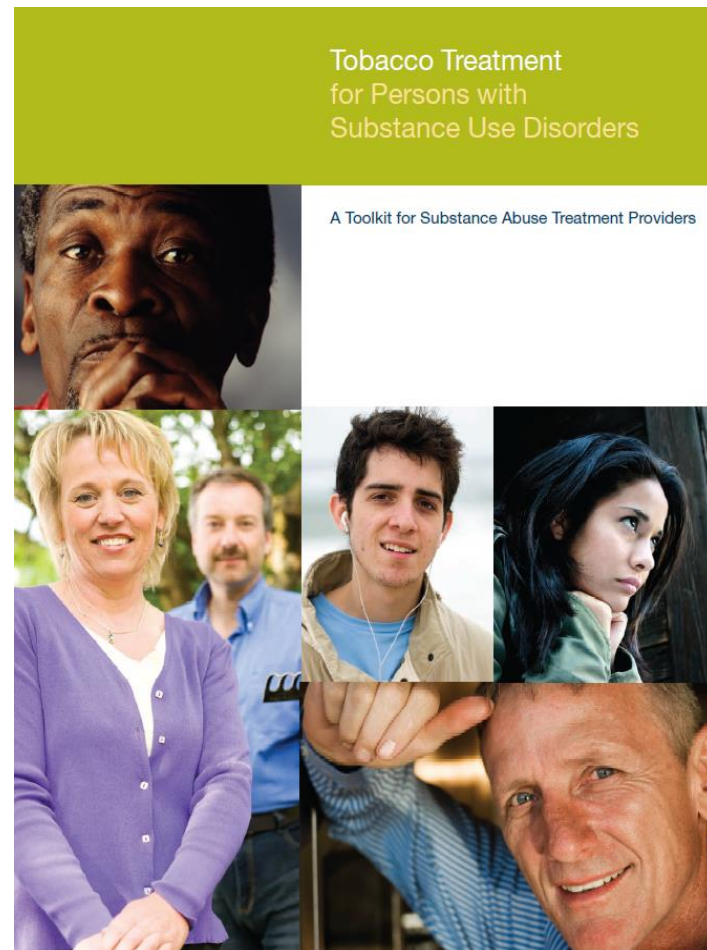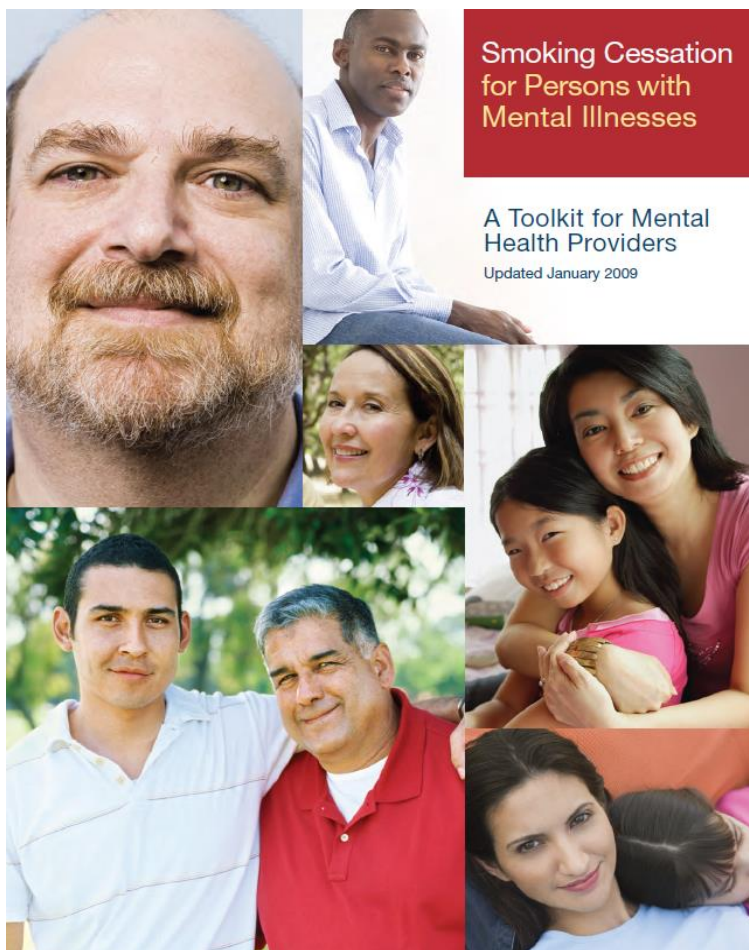
Tobacco Cessation Medications

The only medications approved by the Food and Drug Administration (FDA) for tobacco cessation are:

- Nicotine gum
- Nicotine lozenge
- Nicotine patch
- Nicotine nasal spray

- Nicotine inhaler
- Bupropion SR tablets
- Varenicline tablets

Building the Knowledge Base

PDF's available for download at: www.bhwellness.org

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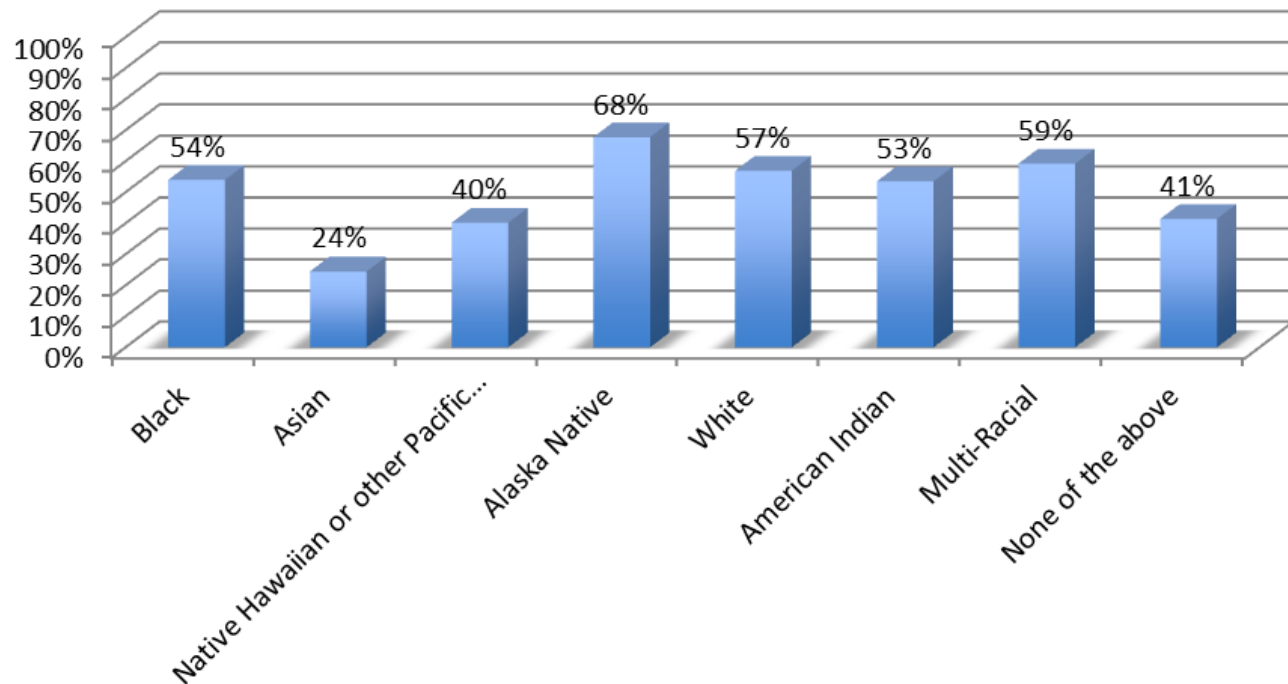
Culturally Diverse Smokers: Race and Ethnicity

- 31.4% of American Indians/ Alaska Natives
- 9.2% of Asians
- 20.6% of blacks
- 12.5% of Hispanics
- 21.0% of whites

CDC, 2011

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TRAC Data for PBHCI Enrollees

Percent of Individuals who Identify as Every Day Smokers - By Race

Culturally Diverse Smokers: Education

- 45.2% with GED diploma
- 33.8% with 9–11 years of education
- 23.8% with a high school diploma
- 9.9% with a undergraduate degree
- 6.3% with a postgraduate degree

CDC, 2011

TRAC Data for PBHCI Enrollees

Percent of Individuals who Identify as Every Day Smokers - By Education Level

- Less than 12th Grade: 60%
- 12th Grade /High school...: 56%
- VOC/Tech diploma: 52%
- Some college or university: 50%
- Bachelor's degree (BA, BS): 35%
- Graduate work/Graduate...: 33%

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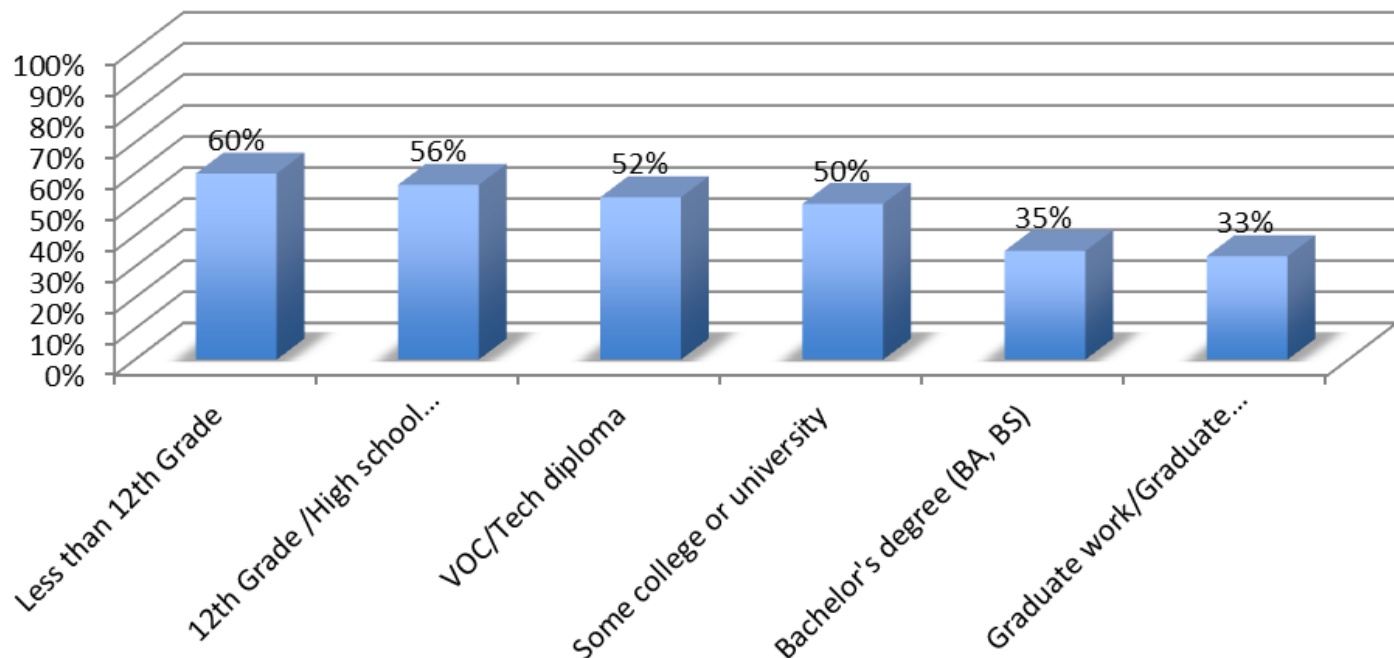
Culturally Diverse Smokers: States a Regions

- Ranges from 9.1% in Utah to 26.8% in West Virginia

- Highest in the Midwest (21.8%) and South (21.0%) and lowest in the West (15.9%)

CDC, 2011

A Tobacco-Free Toolkit for Community Health Facilities

Project TRUST Edition

www.bhwellness.org

The Limits to Knowledge

SURGEON GENERAL'S WARNING: Smoking Causes Lung Cancer, Heart Disease, Emphysema, And May Complicate Pregnancy.

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Generating Motivation

- **Identifying Cues**
- **Changing the Reward Pathway**
- **Shaping the Environment**
- **Reinforcing Desired Actions**

Administrative Support

- Workflow Guidelines
- Screening, Assessment & Treatment Planning Infrastructure
- Clinical Resources
  - NRT, Counseling
- Consultation
- Continuing Education
- Reimbursement Tools

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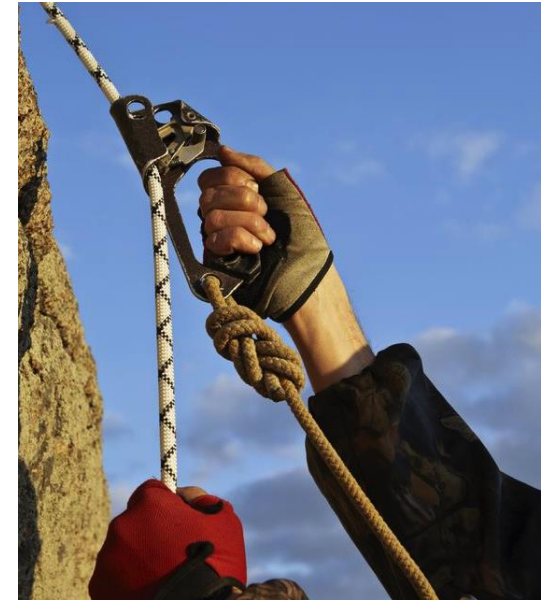
Stepped Implementation

- Clear Time-Line

- Human Resources
  - Roles and responsibilities
  - Annual reviews

- Response to Challenges

Change Outcomes and Indicators

- Rapid Transition Committee/ Workgroup
- Policy Example
  - Timeline Set
  - Policy Drafted
- Clinical Example
  - Training in Treatment Guidelines
  - Individual and Group Interventions Scheduled
- System Example
  - Roles and Responsibilities Clarified- HR
  - Screening and Assessment/ EHR
  - Integration into Treatment Planning

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